Promoting wellbeing, Preventing harm

Delivering GIRFEC in Glasgow’s Third Sector
Authors and acknowledgements

The principal authors of this report are Nikki Bell (Director, FMR Research) and Mick Doyle (Policy, Research and Communications Manager, GCVS). Members of the Everyone’s Children Advisory Group have also been invited to comment on a draft of this report and case study organisations have approved the content specifically relating to their organisation.

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A special thanks to those organisations who gave permission for case studies to be used and provided some of the photographic images used in the report.
INTRODUCTION

This report outlines the findings of a study undertaken in spring/summer 2014 by FMR Research and GCVS Everyone’s Children project to map and explore:

- the role played by the third sector in supporting the GIRFEC agenda;
- awareness and involvement in policy and implementation of the GIRFEC agenda;
- interest in and barriers to delivering and growing this role; and
- the practical support they would like to see the Everyone’s Children project provide.

This study involved 48 depth interviews, an online survey of 184 organisations and 3 workshops with 16 participants, plus a brief literature synthesis of local/national contexts.

A full report has been prepared, including more detail on the various aspects of the research, and different aspects of the findings will also be highlighted and explored further by the Everyone’s Children project over the coming months. This will be shared with the project’s stakeholders including the Third Sector Forum, the wider Third Sector Interface in Glasgow and other TSIs across Scotland; and with our key public sector partners through a variety of means including the existing strategic planning structures associated with the Integrated Children’s Services Plan.

The findings of this research should be widely discussed within the Third Sector and across the wider planning structures dealing with Integrated Children’s Services Planning but also in other planning contexts such as child poverty, community learning and development, physical planning and economic regeneration. They suggest that there is much which could be done to improve the impact of GIRFEC in Glasgow, building on progress made to date. Many of these findings are also reflected in parallel experiences being shared via Third Sector Interfaces across Scotland.
HEADLINE INITIAL FINDINGS

• **Collective TS clout:** Organisations supporting children, young people and families include many small local projects and groups, specialist national organisations operating in the city and organisations concerned with the wider context for wellbeing, e.g. housing associations. The collective contribution of the third sector is huge, with responding organisations reporting turnover of £158million and 4,248 staff based in Glasgow.

• **Impressive scale of activity:** At least 28,000 service users who were children and young people were supported by responding organisations. Although some may access more than one service, this is a significant underestimate as many organisations known to provide services did not complete the survey and this figure excludes the number of service users quoted by national organisations, housing associations and credit unions.

• **Diversity of activity:** Organisations identified their contribution to wellbeing in all SHANARRI wellbeing domains, working with individuals and groups, via specialist children, young people and family services and through use of arts, cultural and sporting activities which enrich lives and build resilience.

• **Awareness, knowledge and use of GIRFEC needs work:** A third of respondents were unaware or only recently knew about GIRFEC, 50-60% of respondents did not explicitly use it in their practice, planning or reporting, although it largely chimed with what people were doing. Two-thirds said they use the language of GIRFEC, with 54% using the wellbeing indicators. Although GIRFEC has ‘champions’ in the sector, some remain to be convinced that it is here to stay.

• **Performance on SHANARRI outcomes:** Organisations rated themselves as delivering a mean of ‘7 or 8 out of 10’ across the wellbeing outcomes, and contributing positively to a number of these, which they saw as linked. Glasgow’s progress as a city was viewed less positively at around 6 out of 10. This may be understandable given the challenges its citizens face and the perceived need to improve service co-ordination and involve the third sector in planning to improve wellbeing for individuals, families and communities.

• **Need to inform and involve the third sector more:** 16% of respondents were not aware of any of the key policies tested and 61% did not feel involved in any of these. 14% were not aware of any related planning structures tested, with 45% not involved in any of these. 70% felt the third sector’s input to planning for children, young people and families was not well enabled at present. Just 17% rated it positively and there were also concerns about joint working amongst and with the public sector.
HEADLINE INITIAL FINDINGS

- **Third Sector interest in being more involved in GIRFEC...provided there is support to do so:** 53% of respondents want to be more involved in delivering GIRFEC but 43% reported lack of project development capacity as the key barrier to doing this.

“GIRFEC/SHANARRI makes our job easier and gives us a focus. In the past, we were just working with kids, which is a good thing but it doesn’t give you much idea about the effect of your work. GIRFEC broadens your vision, it’s a very effective tool.”

Draft action plan

A draft plan of action which responds to the many issues highlighted by the research can be found at the end of this report. It highlights the need to:

- raise awareness of GIRFEC and the actual/potential contribution of the third sector in communities and to the public sector, e.g. named persons;
- build the capacity of the third sector, via training and co-ordination of effort, to respond to and participate more fully in the GIRFEC agenda in Glasgow;
- improve third sector influence, advocacy and strategic capacity building; and
- disseminate the study findings, conduct further analysis of the data and conduct further exploration of some issues.
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1. BACKGROUND AND OBJECTIVES

The GCVS Everyone’s Children project, launched in 2014, is funded by the Scottish Government to support the third sector in the city to consolidate and strengthen its role in delivering the Getting It Right for Every Child (GIRFEC) policy and practice framework via provision of information, training and developmental support at local and strategic levels. GIRFEC is a framework for developing a consistent way of working with children, young people up to age eighteen and their families – where children are placed at the centre and services are both holistic and joined up.

GIRFEC recognises that most children’s needs will be met by their families, the ‘universal services’ of health and education and services provided in and by their local community. However, some may need specialist support at particular points in time or on an ongoing basis. The key thing is that children, young people, families and those working with them know what support is available when they need it, and can rely on this being delivered effectively. GIRFEC provides a shared language and way of working, which ensures everyone knows what is involved and support is identified, planned and provided to a consistently high standard. Primary prevention and other forms of early action can be taken, before circumstances reach crisis point, with more accessible joint-working in communities and across organisational boundaries to help children, young people and families reach their potential.

Delivering wellbeing

GIRFEC utilises several key concepts and tools to systematically consider the components of wellbeing and how these affect immediate and future life chances. The key conceptual tool is the SHANARRI wellbeing indicators, which is generally represented in a wellbeing wheel. These help those providing or planning services to fully consider children’s wellbeing by looking holistically at relevant aspects of their lives. These are:

- their safety from abuse, neglect or harm;
- their physical and mental health;
- the factors affecting their ability to learn and achieve their potential;
- their essential nurturing needs in families and communities;
- how physically and socially active they are;
- the extent to which their views are heard and respected in the decisions which affect their lives;
- how they are enabled to take responsible decisions and actions in their own lives and in their community; and finally
- how they are included and able to overcome the socio-cultural and economic inequalities which affect their ability to achieve their full potential and life goals.

The third sector in Glasgow is delivering services which are addressing these key aspects of wellbeing. For example, GCVS’s Infobase identified over 1,000 contacts who are providing services directly to, or which impact upon, children, young people and families in the city. These include, for example, a variety of specialist services providing counselling or play
1. BACKGROUND AND OBJECTIVES

opportunities to those with very specific needs, community based activity-focussed organisations supporting wellbeing for a wider spectrum of children and young people, those delivering services to parents/families, more general community anchor organisations such as housing associations, and faith based groups. All of these can have a significant impact on the wellbeing of children, young people and their families because of the services they provide but also because of the way in which these are provided. A sports club, for example, has an obvious impact on physical health but can also contribute to improved confidence and self-esteem which impacts on achievement levels, provides a positive social network of peers and ‘trusted adults’ who can provide useful guidance and advice. Participation in this environment can help young people feel included and involved, and also contributes towards the respected and responsible indicators. All of this can have a significant impact on how a young person thinks, behaves, develops, achieves, interacts with others and feels about themselves, which can go some way to deliver both the primary prevention and early intervention agendas.

The third sector therefore has a key role in the implementation of GIRFEC. The Everyone’s Children project is assisting it to deliver these aims by profiling the services the sector provides, raising the awareness of its wellbeing enabling work, providing accessible information on GIRFEC, building the sector’s capacity and skills, and ensuring that their essential role is deepened and broadened at all levels of the planning of services for children, young people and their families. This move toward improved primary prevention is also reflected in the wider public service reform and community empowerment agendas, and is now enshrined in the recent Children & Young People (Scotland) Act.

Key objectives of the study

This report outlines the findings of a research study undertaken by FMR Research and GCVS staff in spring/summer 2014. The research aimed to understand and explore:

- the current and potential role the third sector plays in supporting children, young people and families, the distribution of this support geographically and by target group;
- barriers associated with delivering and growing this role, including organisational development and capacity building;
- the extent to which the sector is aware of the national and local policy and practice context and is involved in the planning and implementation of Glasgow’s children and families’ services;
- the willingness and issues facing the sector in responding to the GIRFEC agenda more fully; and
- to inform the programme of practical support provided by Everyone’s Children and partners involved in this work in Glasgow.

It also provides a developing dataset which illuminates the work being done by Glasgow’s third sector to mobilise community assets and give the city’s children and young people the best start in life. This dataset will be used to further explore that contribution relative to the issues faced by young people in the city and to inform the development and implementation of the city’s Integrated Children’s Services Plan.
2. OUR APPROACH

The study used mixed methods in order to achieve the aims and objectives. The key elements were:

- a brief literature synthesis to locate the study within the national and local contexts;
- 48 depth interviews (30 completed by FMR staff, 18 by GCVS staff) with key statutory and third sector stakeholders, at both strategic and delivery level, to tease out the issues to be tested in the quantitative survey;
- an online survey of third sector organisations estimated to provide services or activities for children, young people and families, sourced from GCVS’s Infobase (914 organisations, via 1,146 contacts, were invited to give their views and responses were received from 184 unique organisations, a response rate of 20%); and
- three workshops with 16 third sector stakeholders.

It should be noted that responses to the survey were more likely to be received from those who understood the wider preventative role they played in supporting children, young people and families. The response was also stronger from larger organisations, with fewer responses from smaller, more informal organisations, which should also be taken into account when interpreting findings. Please note that not every respondent gave a response to every question, possibly where respondents did not feel able to comment, so the base varies for each question.
3. KEY FINDINGS

3.1 Profiling the third sector

3.1.1 Funding

- 72% (127) of organisations received grant funding (49% from the local authority, 31% from Big Lottery, 30% from Scottish Government and 47% from other sources).
- 44% (78) received income from service charges/consulting/trading, 44% (77) from donations and just a quarter (25%, 44), who were more likely to be larger organisations, received income from services commissioned by the public sector.
- The qualitative discussions highlighted the piecemeal nature of grant funding, where organisations often have many different funders (some reported 20 – 30 per annum), all of whom have different bidding and reporting requirements. This can be extremely onerous to service and drain available development capacity for other activities such as joint planning at individual or service levels. Core management activities are often not adequately resourced by funding bids and funding is usually short-term. Both of these factors detract from service delivery, creativity and longer-term planning and development of the organisation (and therefore from the development of the linked network of services envisaged by GIRFEC).
- 52% (74) had income of less than £250,000 in the last financial year and 83% (119) had a turnover of £1million or less. One in eight organisations who provided data had a turnover of less than £50,000, illustrating the ‘hand to mouth’ nature of some parts of the sector, although smaller organisations were less well-represented than Infobase would suggest is the norm in the sector.
- However, the collective financial clout of those responding to the survey was significant. The table below shows the income for responding organisations in total, excluding national organisations and excluding national organisations plus housing associations and credit unions. Figures are presented using the lowest value of each income band and the midpoint.

<table>
<thead>
<tr>
<th>Who is in/excluded in the income figures?</th>
<th>Using the lowest value of each income band and £10k for the lowest band</th>
<th>Using the mid-point of each income band and £25million for the upper band</th>
</tr>
</thead>
<tbody>
<tr>
<td>All responding organisations (n=180)</td>
<td>£158million</td>
<td>£221million</td>
</tr>
<tr>
<td>Excluding national organisations (n=128)</td>
<td>£73million</td>
<td>£99million</td>
</tr>
<tr>
<td>Excluding national organisations, Housing Associations and Credit Unions (n=116)</td>
<td>£14million</td>
<td>£25million</td>
</tr>
</tbody>
</table>
GIRFEC Case Study #1

**Who?**
North United Communities (NUC)

**Where?**
Maryhill, Ruchill, Cadder and Milton, North Glasgow

**Aims**
Positive outcomes for young people, keeping children safe and families together

**Activities**
NUC was established in 1979 and has a team of 12 staff. Their family support service works with families with children who may be at risk of becoming looked after, to reflect on possible causes and work towards solutions together. They receive referrals from Social Work, often supporting families who will not engage with statutory services, in their own homes. At the time of interview, NUC were supporting 48 families with 67 children, including those affected by alcohol or substance misuse, poor school attendance, antisocial behaviour, or child protection concerns. They provide holistic support to families on issues related to parenting, housing, finances, health and/or behavioural problems, and refer on for specialist support where required.

NUC also work with c350 young people, providing youth clubs and street work, with sports, art, drama and educational activities.

**Delivering Wellbeing**
NUC has been using GIRFEC intensively for several years and are experienced advocates of the approach, which is embedded in their practice. They use the Wellbeing Wheel and My World Triangle tools inclusively in their family support work, to assess needs across the indicators and to develop and review Child’s Plans. Safety is a priority and staff are trained to recognise and respond to child protection issues. By providing intensive support to parents, and encouraging participation in parenting programmes, NUC help families to create healthy, nurturing environments for children to grow up in.

In their youth work, they use SHANARRI wellbeing domains to plan sessions and review progress, including young people in the process. Activities encourage achievement, by helping young people to set personal development goals, access employability support or achieve learning goals, including higher education. Group work explores issues like healthy eating, or considers dangers associated with drugs and alcohol, therefore encouraging responsible reflection on how behaviour can affect health and wellbeing. One-to-one support and purposeful activity also help reduce offending or antisocial behaviour, by encouraging young people to make positive life choices. NUC’s “unique wraparound support” (such as ensuring young people attend school in the morning, or contacting their school or family outwith youth club hours when they have concerns) is built on respectful relationships with young people, making it possible for staff who recognise difficulties to intervene effectively. As a result of their preventative work in these and other areas families stay together, children & young people are safer, they achieve more, and are at less risk of offending and engaging in antisocial behaviour.

**Contact:**
Jill McKay, Project Manager

**More info:**
KEY FINDINGS

3.1.2 City coverage

The research sought to establish in which sectors and wards in the city organisations were active in order to map the scope and scale of activity as far as possible. A third of organisations (62) said they were active in each of the city’s three sectors (North West, North East and South), and the likelihood of them being active across the city increased with size of organisation. It must be noted that interpretation of the term ‘active’ varied, as some appeared to interpret this as where they were based rather than where they might draw members/users/clients from or where they may have an impact in other ways, for example in representing young people’s views on a wider basis. It should also be noted that some responding organisations such as housing associations or community halls would not see children or young people as their only or primary client group (although the importance of the built environment and community wellbeing on young people is recognised, in the development of appropriate housing or play provision, for example), others provided direct support to parents (rather than direct contact with children and young people) and some children and young person specific services would target specific groups only rather than being universally accessible. The ‘topline’ figures of 53 – 76 organisations being ‘active’ in each ward therefore suggest a higher level of local activity than is likely to be the case in reality.

3.1.3 Staffing and scale

Collectively, respondents had significant staffing resources: respondents told us they had 4,695 staff at their own location (n=168), with a total of 4,248 deployed in Glasgow city (n=165) and 11,174 in total (n=165, some organisations were large, with national coverage). A total of 2,754 volunteers also worked in Glasgow with the organisations who responded to this question (n=115).

For individual organisations, the picture was markedly different: 13% (21) had no paid employees at all (18%, 30, none in Glasgow). Most organisations tended to be small, with around half (55%, 91) having less than 10 employees in Glasgow. Just 6 organisations had 100 or more employees in Glasgow and 16 were of that scale as a whole. Volunteer numbers were also relatively low for most respondent organisations, with 13% (15) having no volunteers at all in the city, 45% (51) having 1 - 10 volunteers in Glasgow (which is still a significant resource which also needs to be managed) and 5 organisations having 100 or more volunteers in total. The mean number of volunteers for organisations on Infobase who provided this information was 25, which is very similar to respondents to the survey.

3.1.4 Clients/service users

- Around four out of five organisations who responded stated that they worked to some degree with children (79%, 146) and/or young people (86%, 159), although these target groups may not be the primary focus for all organisations, as noted above. Of those, 44% (77) included work with children or young people with additional support needs.
KEY FINDINGS

- 60-73% (110-135) of organisations worked with those aged 5-11, 12-17 and 18-24 whilst 42% (77) worked with under 5s.
- When organisations were asked to identify the main age group they worked with (17%, 31, did not respond so may have targeted more than one age group equally), the most common age groups were 5-11s and 12-17s:
  - 14% (20) said under 5s;
  - 32% (46) said 5-11s;
  - 36% (51) said 12-17s; and
  - 18% (26) said 18-24s.
- 5% (10) said they only worked with families, parents or carers, not children or young people on their own.
- From those who provided figures, the total number of service users on an annual basis (although it is recognised that some service users may have accessed more than one of the responding organisations) was 57,301. The following table shows the total number of service users reported for all responding organisations, excluding Housing Associations and Credit Unions then also excluding nationals (as the question did not specifically ask for service users in Glasgow so we cannot assume they answered on that basis) and provides comparative population figures.

<table>
<thead>
<tr>
<th>Age groups</th>
<th>Total service users – all responding orgs n=127</th>
<th>Total service users – excl HAs and CUs n=124</th>
<th>Total service users – excl nationals, HAs and CUs n=91</th>
<th>Census 2011</th>
<th>Mid Year Estimate 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-4 year olds</td>
<td>5,085</td>
<td>5,065</td>
<td>3,290</td>
<td>32,973</td>
<td>28,467</td>
</tr>
<tr>
<td>5-11 year olds</td>
<td>29,443</td>
<td>29,387</td>
<td>10,549</td>
<td>38,476</td>
<td>40,002</td>
</tr>
<tr>
<td>12-17 year olds</td>
<td>18,218</td>
<td>17,478</td>
<td>11,702</td>
<td>36,810</td>
<td>34,254</td>
</tr>
<tr>
<td>18-24 year olds</td>
<td>4,555</td>
<td>4,522</td>
<td>3,139</td>
<td>77,090</td>
<td>67,474</td>
</tr>
<tr>
<td>Total</td>
<td>57,301</td>
<td>56,452</td>
<td>28,680</td>
<td>185,349</td>
<td>170,197</td>
</tr>
</tbody>
</table>

This represents only part of what goes on in the city within the third sector as the majority of organisations self-identifying as working with children, young people and families within Infobase did not participate. Other Everyone’s Children engagement with the sector would suggest that different methods of engagement may help surface the scale of contributions from other organisations in future.
KEY FINDINGS

3.1.5 Services and activities

Organisations provide a wide range of services and specific activities for children, young people and families. Respondents were most likely to state that they provided arts and cultural activities (42%, 66) and sporting activities (40%, 63) from the list of options tested but wellbeing and parental supports also featured highly as arts/cultural and sporting activities were clearly often used as a route to engage with children and young people when providing support in other ways. In other words, some organisations have primary aims, activities and intended impacts but also achieve secondary impacts in terms of the SHANARRI wellbeing indicators as a result of these. Parenting support or training was most common for those working mainly with 0-4s, sporting activities was strongest amongst the 5-11 and 12-17 age groups and arts and cultural activities amongst the 18-24s.

![Fig 3: What do you do with the children, young people or families you work with?](chart)

n=156
KEY FINDINGS

3.2 Awareness, knowledge and use of GIRFEC

3.2.1 Awareness

Awareness of GIRFEC varied across the sector. A third of respondents were unaware or only recently aware of it - 17% (27) hadn’t heard of it prior to the survey and 16% (25) had only heard of it in the last year or so. 28% (44) became aware of GIRFEC in the last two to three years (i.e. since the consultation around the Children and Young People Bill) and 34% (54) had been aware of it for four years or more. Awareness was higher amongst larger organisations.

![Fig 4: When did you first become aware of GIRFEC?](image)

![chart]

n=159

3.2.2 Knowledge

Three-quarters (112) of those who had heard of GIRFEC prior to the survey said they felt quite or very well informed about it. Just 2% (3) said they felt not informed at all. Including those who had not heard of GIRFEC prior to the survey brings the ‘well informed’ percentage down to 64%, so there is scope to improve this figure considerably. Depth interviews and subsequent Everyone’s Children training delivery would suggest that whilst managers, who may also be the principal respondents in the survey, may know of GIRFEC, this is not necessarily true of others within their organisations.

There is therefore work to be done to widen understanding of GIRFEC amongst staff, volunteers and those involved in governance. Smaller organisations, as might be expected were less likely to feel well-informed as were those mainly targeting 18-24s (56%, 10, compared to 88%, 37, for those targeting 12-17s).

3.2.3 Source of information on GIRFEC

Voluntary sector networks (67%, 83) were the most common sources of information on GIRFEC, followed by public sector partners (51%, 63), Scottish Government (42%, 52) and colleagues (33%, 40). Voluntary sector networks could include GCVS’s Everyone’s Children Network, youth work forums, childcare forums, etc., but could also involve the three Voluntary Sector Networks within the city. Further research may be helpful in illuminating this area further.
GIRFEC Case Study #2

Who? Includem

Where? Glasgow-wide and other areas of Scotland

Aim: To help some of Scotland’s most vulnerable and challenging young people to achieve positive change in their behaviour and relationships and to support them to move towards leading fulfilling lives.

Activities: Includem has approximately 100 staff, working with vulnerable young people for a minimum of 8 contact hours per week. Full-time project workers aim to build trust, which is vital, as service users are often from unstable, chaotic, or abusive backgrounds, with little trust in adults or authority. Staff use cognitive tools to help young people understand why their behaviour is a risk to their wellbeing or to those around them. They work intensively with those at risk of offending or reoffending and who may also have been in the care and/or justice systems, also working with their families and carers to rebuild relationships and change harmful behaviour.

Diversionary activities such as bowling, cinema or sport are used to develop relationships. Safety is key to Includem’s work, so young people in crisis can contact staff at any time – whether they’re with the police, or alone in the city centre at 2am. The service is available 24/7, 365 days a year.

Delivering Wellbeing: Includem improve wellbeing for some of the city’s most vulnerable young people by offering alternatives to custody, working to improve school attendance, support family relationships and positive parenting, improve health and encourage young people to take responsibility for their wellbeing.

Includem was an early adopter of GIRFEC, which is now embedded throughout their practice, policies and procedures. Young people are involved in identifying where they think they sit on the Wellbeing Wheel in relation to each of the indicators and are supportively challenged when behaviour, such as drinking excessively or fighting, impacts on these, as often they may self-identify as being relatively safe and healthy. The My World Triangle also helps young people consider issues affecting their wellbeing, which may be leading to high-risk behaviour. This participative, personalised approach strengthens the respected, responsible and included elements of GIRFEC and by encouraging young people to set personal goals they also address the achieving element.

GIRFEC tools are also used with parents and carers to stress the importance of routines, like bed and meal times, school attendance and homework, to help families create an environment which is nurturing and healthy. Includem has a high success rate in reducing offending and they have won awards for their work on gang-related activity and in supporting foster carers. For them, GIRFEC formalised their holistic, inclusive approach, centred on the young person. GIRFEC tools have helped them embed the approach in everything they do with young people and families, providing a common language to use with partners and assisting them with monitoring and evaluating their work.

Contact: Michael Shanks, Communications and Policy Manager

More info: http://www.includem.org/
**KEY FINDINGS**

### 3.2.4 Using GIRFEC

The degree to which organisations evaluated themselves as explicitly or implicitly responding to GIRFEC was fairly evenly split across different aspects of their work, as can be seen from the figure below (Is GIRFEC reflected in your organisation’s...?). As might be expected, smaller organisations were less likely to reflect GIRFEC in these aspects of their work.

**Fig 5: Evaluation of GIRFEC involvement**

Two-thirds of respondents said they used the language of GIRFEC (68%, 81) and just over half (54%, 64) use the SHANARRI wellbeing indicators. The My World Triangle assessment tool was used by a third of respondents (39) and 22% (26) use the Resilience Matrix. The Scottish Government online self-evaluation guide for the Third Sector had only recently been released, but 10% (12) said they had used it already.

Whilst some respondents do not use GIRFEC as much, as consistently or as overtly as they might wish to do, using GIRFEC was seen to provide a number of benefits, such as:

- It is a useful framework for working with children and young people, focussing discussions and ensuring a consistently holistic approach is taken, not forgetting about any aspects of wellbeing.
- It helps to address more complex individual needs via a common approach, involving key players and providing clarity.
- It attempts to raise standards to a consistently high level.
KEY FINDINGS

- Responding to funders’ requirements by using GIRFEC language in bids, monitoring and evaluation reports (but conversely if funders are not tuned in to GIRFEC, they need to use the appropriate language and tools for them).
- GIRFEC tools are useful for evidencing the progress of individuals, groups of service users or families and their achievements, with various degrees of formality.
- GIRFEC tools such as the SHANARRI wellbeing wheel, My World Triangle and Resilience Matrix were rated highly and found to be useful by those who used them.

3.2.5 Balancing prevention and intervention

GIRFEC aims to improve the outcomes for all children and young people who need it. The framework is designed to support those with existing issues in addition to providing preventative support to those who may be vulnerable to less positive outcomes before issues manifest themselves too deeply. In order to deliver its preventative agenda, GIRFEC needs to be active at a population-wide level within communities. One means of doing this is by developing networks of services which support young people and remove barriers to wellbeing.

When asked to think about this and rate their organisation’s performance across three specific dimensions of GIRFEC, responses were positive for those who gave a view and who felt their organisation did this (6-12% did not know and 16-25% said they did not aim to do this).

- 98% (100) of those who rated their organisation felt they helped overcome issues for those with significant existing needs very or quite well;
- 94% (90) of those who rated their organisation felt they intervened early to stop problems from becoming more severe; and
- 80% (65) of those who rated their organisation felt they prevented problems arising in communities.

However, there was a bias towards helping those with significant identified needs rather than more preventative work with individuals or more generally in the community. The fact that 22-37% of respondents did not think their organisations did this or did not know suggests gaps in understanding of the role that all organisations working with children, young people and families can play in building community resilience and wellbeing. This supports the case for further information, awareness raising and training.

3.2.6 UNCRC

GIRFEC and the recent Children and Young People Act seek to actively embed children’s rights. Although exploring children’s rights was not a core element of this study, 54% (67) of respondents reported using the United Nations Convention on the Rights of the Child (UNCRC) in its work. However, 21% (26) did not and a quarter (30) either did not know or were unaware of UNCRC.
KEY FINDINGS

3.2.7 Commitment to GIRFEC

The way in which service providers feel about GIRFEC and the extent to which they recognise their own role within it will affect its success. The depth interviews highlighted a spread of views about GIRFEC. There were a few enthusiastic champions who promoted its philosophy, some more cynical stakeholders who preferred to take a more bespoke approach to their work rather than adopt the ‘latest thing’ and have to keep changing things, and those who were less aware of or engaged with GIRFEC. Whilst awareness and active buy-in to GIRFEC varied, most depth interviewees clearly worked in a complementary way to GIRFEC principles. Survey respondents were asked which of the following statements applied most closely to their organisations to gain a sense of the commitment to GIRFEC.

Fig 6: Implementation of GIRFEC

Nearly two-thirds (64%, 58) of those who had implemented GIRFEC to some extent had found this to be very or quite easy to incorporate into their work, with just 6% (5) finding it quite difficult and the remainder neutral (27). This is a useful metric to help promote wider use of GIRFEC.
KEY FINDINGS

3.2.8 Perceived ratings against SHANARRI aims

Participants were asked to rate the performance of their own organisation and, overall, on how they felt Glasgow as a whole was performing against each of the eight SHANARRI wellbeing outcomes, in terms of ‘marks out of 10’. They were also asked to prioritise these.

3.2.9 Own organisation

Scores for organisational performance varied given the diversity of organisations and their focus, with lowest scores amongst depth interviewees ranging from 2.5 to 5.0 out of 10. The highest score awarded to each indicator/outcome was 10, with three organisations awarding their own organisation 10 out of 10 on every one. Mean responses varied from 7.8 (Nurtured) to 8.4 (Included) for depth interviewees and from 7.6 (Responsible) to 8.5 (Active) for online survey respondents (n=108-118).

Prioritising the SHANARRI wellbeing outcomes for their own organisation was challenging for some as they were perceived to be inter-related.

As a general rule organisations prioritised more highly the indicators they rated themselves most highly against, as might be expected. The ‘composite’ prioritised order for depth interviewees overall (where they felt able to do so) was safe, healthy, included, nurtured, respected, active, achieving and responsible (most important listed first). Online survey respondents were asked to select their top three priorities and the ranked order was safe, healthy, included, respected, achieving, nurtured, active and responsible.
GIRFEC Case Study #3

Who?
PEEK – Possibilities for Each and Every Kid

Where?
Based in Glasgow’s East End but operating across the North East

Aim
To improve the quality of life of children, young people and their families through their involvement in effective creative arts, learning and free play opportunities.

Activities
PEEK started providing play opportunities in 2000 and now has a team of 22 core staff, many sessional and freelance workers and more than 60 volunteers. The vast majority of volunteers are aged 14 – 25. The organisation now serves 24 East and North communities, mainly working with primary school age children. PEEK has 4 main outreach programmes: young volunteer and peer education to support young adults to volunteer in projects; issue-based and physical activity-focussed youth work; arts projects and indoor play for children and families; and finally outdoor play and active play encouraging children to reclaim their streets and green spaces.

Delivering Wellbeing
GIRFEC fits well with PEEK’s ethos of promoting wellbeing across all the wellbeing domains. As a front line organisation it provides everyday support to many children and young people by helping them to achieve their potential and collaborative approach (with young people, their families and other agencies) to achieve positive outcomes.

The project provides opportunities for free play due to the children’s play needs which are influenced by their family situation and circumstances; their physical, sensory and learning abilities; their ethnicity and culture, the type of area where they live and their individual interests. PEEK listens to youngsters; respecting their views, providing local children and young people with a range of play environments and opportunities whilst developing high quality play provision that is appropriate, local, stimulating and challenging for all children and young people. So, obviously impacts on the safe, healthy and active wellbeing domains.

PEEK also encourages and helps youngsters to learn about risk, gain a better understanding of others and so break down barriers (territorial, religious, cultural, generational and gender-based), improves their behaviour, confidence and self-esteem and access support in many other ways. The project clearly impacts on the nurture, achieving, responsible, respected and included domains too.

Many former child participants have gone on to become volunteers and staff members, ‘recycling’ the investment made in them back into their community and reinforcing the positive outcomes of PEEK’s approach.

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More info:
http://www.peekproject.org.uk/
KEY FINDINGS

3.2.10 Glasgow as a whole

Glasgow’s overall response as a city to investing in work to improve each of the SHANARRI wellbeing outcomes for children, young people and families was explored in the depth interviews. This question applied to respondents’ sense of how all work from all partners was collectively contributing to wellbeing.

The responses across the indicators were rated 2 points or so lower than those for their own organisations, at around the 6 out of 10 mark, and fewer respondents felt able to comment. Ratings spread from 0.5 to 10 for each indicator, but qualitative discussions stressed the work still to be done to impact on wellbeing in the city, which may be useful to inform planning and development work.

Prioritising indicators for the city was more challenging, with participants recognising the need to address issues coherently and holistically to make a real difference. The need for strategic leadership, support and funding to achieve GIRFEC’s aims was highlighted, however.

The study also looked at how well participants thought the city overall was doing on specific aspects of the partnership activity to deliver the key outcomes of GIRFEC. Whilst 38-48% (48-59) of the sample were unable to comment on this, less than half of respondents rated Glasgow’s performance as good or very good with regard to co-ordinating services, involving the third sector, children’s services planning and delivering across the wellbeing indicators. This suggests that there are some significant concerns about the implementation of GIRFEC in the city which would be explored further as well as a clear need to strengthen the opportunities for the third sector to contribute fully to this.

The impact of GIRFEC was not perceived to be consistent across the city, however. For example, it was highlighted that specific groups, such as minority ethnic communities or areas of greater deprivation where local people do not tend to access city wide facilities and opportunities, could not be rated as highly.
KEY FINDINGS

3.3 Planning and partnership working

Awareness of and involvement in sixteen key planning structures were tested, drawn from those in the ICSP and Single Outcome Agreement.

3.3.1 Awareness and involvement in key policies

Awareness of and involvement in key policies relating to children and young people varied.
- Around three out of five respondents were aware of the Early Years Collaborative, Glasgow’s Single Outcome Agreement and the Integrated Children’s Services Plan but there was lower awareness of the Glasgow GIRFEC pilots (40%, 51), One Glasgow Improving Futures (37%, 47) and Thriving Places (33%, 42). 16% (20) of respondents were not aware of any of the key policies tested. The depth interviews illustrated a mixed awareness of the processes and ways of working related to these structures.

Involvement was highest for the Glasgow Single Outcome Agreement, One Glasgow Improving Futures (Early Years) and Early Years Collaborative (16-17%, 20-22), but 61% (77) had not been directly involved in any of those tested. Depth interviews suggest that this may be because a relatively small number of organisations have been directly involved in implementation, so this is not surprising.

3.3.2 Awareness and involvement in planning structures

- Awareness of Community Planning – Sector or Area Partnerships and Glasgow Third Sector Forum was highest, at 67% (85/84), followed by 60% (67) being aware of local voluntary sector networks. Awareness of the Listening to Children and Young People Steering Group was lowest, at 16% (20), and 14% (18) were not aware of any of the 16 planning structures tested. This suggests the need to improve communication links between ICSP and CPP structures to help ‘join the dots’ and maximise the value of the greater participation of third sector organisations in CPP structures.
KEY FINDINGS

Fig 9: Awareness and involvement in planning structures

- There was greatest involvement in local voluntary sector networks (33%, 41), followed by Glasgow Third Sector Forum (25%, 31) and Community Planning Partnership (21%, 17), although 45% (57) were not involved in any of the planning structures tested.

- This suggests there is room for improvement in both awareness and involvement in planning structures in the city. This links to the work required to help define the wellbeing outcomes, their degree of overlap and map this in terms of provision across the city and age groups, to ensure any gaps are filled in future.
KEY FINDINGS

3.3.3 Enabling the third sector contribution

43% (53) of survey respondents did not know to what degree the planning structures for children, young people and families within Glasgow enabled the third sector contribution at present. This suggests that awareness raising work outlining the roles of these structures and encouraging participation in them would be helpful. Of those who gave a view, 70% (50) felt this task was not very well or not at all well delivered, with just 29% (21) giving positive feedback.

A number of improvements were suggested, as follows:

- involving more of the third sector more effectively;
- recognising the contributions of the sector and treating the sector as equals and key providers of services;
- improving communications and awareness raising of issues within and across sectors;
- improving third sector funding levels, to match the increasing reliance on primary preventative service provision delivered by the sector; and
- better integration of work, networks and communications around the GIRFEC agenda within the third sector.

3.3.4 Partnership working

Depth interviews explored joint working with a variety of different organisations in the statutory and third sectors and this was tested further in the online survey. The organisations rated good or very good for joint working by more than half of those who could give a view (n=53 – 75) were:

- small third sector organisations (82%, 59);
- Education Services (67%, 50);
- NHS (55%, 40);
- Glasgow Life (53%, 33) and
- GCVS (52%, 36).

Those rated poor or very poor for joint working by at least a quarter were:

- Social Work Services (35%, 26);
- Community Safety Glasgow (26%, 14); and
- Community Planning (25%, 15).
KEY FINDINGS

Fig 10: How would you rate your experience of joint working on children, young people and families issues with each of the following…?

Those who were able to comment reported very different experiences of partnership working with different organisations. The fact that others did not feel able to comment on this might suggest they have no experience of partnership working with the organisations tested, which may be a finding in itself.

The depth interviews raised some issues about partnership working which the survey sought to explore further via a number of statements which respondents were asked to agree or disagree with. This reinforced the openness third sector organisations have to working in partnership with the public sector and each other in order to effect positive impacts for their beneficiaries. Indeed, a wide range of formal and informal examples of partnership working were cited, extending beyond those reflected explicitly in relevant documents like the Integrated Children’s Services Plan.

However, responses suggest that there is significant room to improve partnership working between smaller third sector organisations, larger third sector organisations and the statutory sector, particularly when more than one statutory sector agency is involved (differing emphasis and conflict between statutory sector partners was perceived to make this challenging, whilst one to one partnership working with the statutory sector was better).
KEY FINDINGS

Fig 11: How much do you agree or disagree with each of the following statements about partnership working in the city?

![Bar chart showing responses to statements about partnership working in the city.](image)

n=84 – 95

3.3.5 Good partnership working was perceived to be affected by:

- lack of funding/staff capacity which induces time pressures to meet organisational commitments and impacts negatively on developmental work;
- competition for funding amongst the third sector, which can make them ‘protective’ of their core work;
- tensions introduced by the purchaser/provider relationship of commissioned services; and
- the lack of appreciation amongst the public sector of the third sector’s current and potential contribution.
GIRFEC Case Study #4

Who?  Home-Start Glasgow North, part of a UK-wide organisation

Where?  NW and NE of Glasgow

Aim  To increase the confidence and independence of families who are experiencing difficulties and have at least one pre-5 child or are currently pregnant.

Activities  HSGN started working in the North West of Glasgow in 2001 and expanded into the East last year. With a staff team of 8, the main office is based in Maryhill with hot desk facilities in the East End. Referrers include social workers, health visitors and also self-referrals. Families receive holistic support from trained volunteers, where the needs have been identified by the referrer and family according to the 14 referral assessment criteria. Support is mainly delivered by home visiting volunteers who have parenting experience and are able to provide practical and emotional support at weekly visits to the families’ homes.

HSGN also support families with the provision of a family group which aims to decrease isolation, help build confidence, reinforce positive parenting skills (music therapy, baby massage, baking, Book-bug rhymes and stories, etc). Therapeutic intervention may also be offered via Video Interactive Guidance for appropriate families.

Delivering Wellbeing  HSGN is a delivery partner for One Glasgow, is involved in the Early Years Collaborative and the Early Years Joint Support Teams initiative in Glasgow, the NE Glasgow Improving Futures Forum (all of which use GIRFEC, for example One Glasgow uses SHANARRI on its referral forms) and the NE Glasgow Voluntary Sector Forum for Children and Families. HSGN uses Home-Start UK wide assessment, monitoring and evaluation processes which are in tune with GIRFEC, but are not explicitly ‘GIRFEC’. HSGN works with families, promoting prevention and empowerment using the resilience matrix and considering wellbeing in a rounded way. Parents are encouraged to recognise and build on their own strengths and emotional wellbeing, widening their network of support within the community.

HSGN’s work is fundamentally about improving the wellbeing of the child(ren), across the wellbeing domains as needs are identified, but focuses on the skills, resilience and confidence of their parents to achieve this.

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KEY FINDINGS

3.3.6 Suggestions for improving partnership working included:

- improving communications across and between sectors;
- improving equality and respect between sectors;
- recognising the specialist and wider primary preventative work of the third sector, especially smaller third sector organisations, in contributing towards wellbeing outcomes;
- longer term, more stable funding;
- working together to maximise the value achieved from the resources available to address challenging life chances and inequalities in the city. This should recognise the strengths, weaknesses and need for diversity within and across sectors and how different ways of working in different organisations achieve complementary impacts.

3.4 Future involvement with GIRFEC and support required

3.4.1 Interest in fuller engagement

The Scottish Government is keen for the third sector to play a more significant and overt role in delivering GIRFEC, which is reflected in the recently enacted legislation on Children and Young People and currently proposed legislation on Community Empowerment.

- Whilst some stakeholders felt they were already engaging with GIRFEC at an appropriate level, 53% (61) would like to be more involved and a further 35% (41) were unsure. This was strongest amongst large and medium sized organisations (68%, 27, and 71%, 12) and those who were already engaged with planning structures in the city to some degree (63%, 42), with just 37% (22) of small organisations seeking greater involvement.

- The most popular reasons for being more involved in GIRFEC were ‘to deliver more of our current services to children, young people and families in line with GIRFEC wellbeing aims’ (67%, 41) and ‘be able to influence what public and third sector services are planned/delivered for children, young people and families’ (64%, 39), but all the options tested were of interest to around half of respondents who had expressed interest in greater involvement.
KEY FINDINGS

Fig 12: How would you like to be more involved?

- The qualitative discussions conveyed a sense of caution from some who were not yet actively engaging with GIRFEC – they were looking for assurances that becoming more involved would add value to what they do – especially given challenges in development capacity. The potential impact of GIRFEC adoption on securing funding was specifically raised as a key potential driver of change.

3.4.2 Barriers to developing GIRFEC in third sector organisations

The key barrier to developing GIRFEC in responding organisations was the lack of project development capacity (43%, 48). Third sector organisations appeared to be very tightly run, balancing funding cuts with maintaining service delivery which was already being run at low cost, with minimal staffing levels. This was followed by not knowing enough about related policy and practice areas (28%, 31), not knowing enough about GIRFEC (23%, 25), gaps in staff skills (22%, 24) and lack of other resources (22%, 24).
3.4.3 Support required

GCVS was keen to know what support the Everyone’s Children project could facilitate to improve engagement with and delivery of GIRFEC in the city.

- In terms of knowledge of GIRFEC, half of organisations (49%, 52) were keen to improve access to and sharing of information (and other resources) between organisations (the key issue for small organisations), whilst 45% (48) organisations were keen to keep up with legislative changes (the key issue for medium and larger organisations). At least a third of respondents overall were interested in how to embed GIRFEC tools in practice, raise awareness of GIRFEC, receive advice on GIRFEC implementation and related policies and practice.
- There was also interest in maximising their influence, with 51% (55) seeking networking opportunities and 45% (48) wishing to engage in local planning for children and young people. The aim of improved partnership working, and support to develop this, was welcomed by over a third of respondents.
- Strengthening their organisations was less of a priority, but assistance with identification and targeting of funding would be welcomed by 50% (53) and building capacity of staff (38%, 41) and volunteers (35%, 37) would also be helpful.
4.0 DISCUSSION AND CONCLUSIONS

This study was primarily a mapping exercise to gauge the current state of play in the third sector around the GIRFEC agenda in Glasgow. This section therefore draws some conclusions emerging from the primary and secondary research, framed around the original research objectives set.

4.1 To improve understanding of the contribution which third sector organisations are currently making to work with children and families in the city and any barriers that they are currently facing in doing so.

The study has provided significant insights into what a variety of different types of third sector organisations are doing with children, young people and families. It has highlighted the scale of activity, with over 1,100 organisations identified as impacting on this target group. Whilst many would consider children, young people and families to be their ‘core business’, others have broader remits, such as community anchor organisations, housing providers or advice agencies. GIRFEC partners increasingly recognise how these activities have a crucial impact on wellbeing. The study has added further detail to the profile of responding organisations in terms of who they are working with, what they do and what difference they think it makes to the wellbeing of children, young people and families.

The response rate was good (20%) given that it was a very lengthy and detailed survey. The fact that a minority of organisations identified at the scoping stage engaged with the study is perhaps a significant finding in itself and it is fair to assume that those less aware of GIRFEC were less likely to respond to the research, potentially not appreciating its relevance to them.

Despite this, many of these continue to describe their activities in Infobase in ways which clearly contribute to the broader wellbeing definition. This suggests a need for further exploration of this contribution, possibly using contact strategies which fit better with how they see their primary functions. This could be achieved in conjunction with bodies supporting Glasgow’s sporting, cultural, faith or equalities sectors and/or organisations such as Sports Scotland.

For those who did participate, the vast majority felt their work helped those with significant existing needs to overcome issues, stopped problems becoming more severe and prevented problems arising in communities. Respondents reported different degrees of emphasis on each of these, suggesting more needs to be done to build understanding of how they deliver primary prevention at community level.

“If you work 35 hours a week you do hands on work for 30 hours and that only leaves five hours for all the paperwork... Incorporating SHANARRI is a management and admin task and you’re never funded for admin, you’re funded to provide front-line services.”

A key barrier across sectors is lack of resources in the present economic climate. The qualitative discussions highlighted the challenges of short-term funding and the impact of public sector funding cuts on both core activities and the ability of organisations to commit capacity to networking, workforce development and joint planning. The survey also highlighted the degree to which the sector relies on grants: 72% of responding organisations...
DISCUSSION AND CONCLUSIONS

received grant funding, often from a cocktail of sources. Just 25% provided commissioned services to the public sector and 44% generated income via trading. This appears to suggest that the current commissioning approach does not lend itself to the needs of small third sector organisations with potentially profound implications for prevention, and that further exploration of this issue would be helpful.

“GIRFEC is very ambitious but there’s an inadequacy of resources and I’m not sure all statutory staff really understand what GIRFEC is about.”

The survey highlighted that many organisations lived “from hand to mouth” with funding often short term and insecure. It is acknowledged that the recent decision by the City Council to move to three year funding for Integrated Grants Funding is helpful in this regard. One in eight organisations providing data have an annual income of less than £50,000 and half have an annual income of less than £250,000. Many organisations felt that the level of investment in their work was insufficient to meet needs increasingly viewed as important to the successful delivery of the preventative aspects of GIRFEC. This is particularly concerning when increased demand for support arising from the impact of the recession on families in terms of factors such as in-work poverty and welfare reform is considered. Many also reported how the fragmented nature of funding, and the struggle to report on it, affected the time they had available for developing their services and this was an important obstacle to improvement.

However, the collective financial clout of those responding to the survey was very significant and is therefore a very important resource for delivering primary prevention at a time when statutory services are struggling with this role.

“GIRFEC reaffirmed that what we were doing all along was the right thing to do”

4.2 To explore the sector’s understanding of the policy and practice context in Scotland and Glasgow in relation to key developments such as GIRFEC, the Early Years Collaborative, One Glasgow and the Implementation of Glasgow’s Integrated Children’s Services Plan.

Around three out of five respondents were aware of key aspects of the policy landscape including the Early Years Collaborative, Glasgow’s Single Outcome Agreement (SOA) and the Integrated Children’s Services Plan. Awareness was lower for specific initiatives such as the Glasgow GIRFEC pilots, the outcomes of the One Glasgow Improving Futures process and the new Thriving Places approach. The level of direct involvement in these was lower, with only 16-17% involved in the SOA, One Glasgow and the Early Years Collaborative. The qualitative discussions would suggest that the policy and planning landscape is relatively opaque, with fewer participants clear about how the various groups, strategies and initiatives fitted together, even if they were aware of the individual parts. This suggests a continuing role for Everyone’s Children to translate this clearly and accessibly as an essential element of effective participation and partnership. The fact that a third of respondents had limited awareness of GIRFEC suggests that there is still a significant job to be done in helping organisations connect with it to improve wellbeing as whole. The fact that awareness has arisen from the legislative
DISCUSSION AND CONCLUSIONS

process for the Children and Young People Act suggests that implementation arrangements for the Act offer opportunities to improve awareness and involvement further.

There is also an ongoing need for awareness and capacity building covering key policy and practice areas, tools, techniques and emerging issues from implementing GIRFEC in Glasgow. This is further evidenced by the levels of demand for both the EC learning programme – delivered alongside the research – and in uptake of the Everyone’s Children regular information bulletin.

The research confirmed that much of the information about GIRFREC comes from third sector sources. It makes sense to build on these networks and improve links with the public sector.

“We develop chronologies for each child, charting their progress over time. These are SHANARRI-based and Children’s Reporters use these chronologies in Child Protection hearings.”

4.3 To establish to what extent third sector activity in Glasgow supports the different aspects of GIRFEC as exhibited in the wellbeing indicators model and how this is distributed geographically and in support of communities of interest.

Participants’ own rating of their performance illustrates that most were confident that their activities were improving the wellbeing outcomes for children, young people and families.

Work to deliver safe and healthy outcomes came out top for both depth interviewees and online respondents. Work to deliver the responsible wellbeing domain was the lowest reported priority for each tranche of the study possibly because it was not as clearly understood as some of the others. That said, the inter-connected nature of the indicators was recognised by many participants, suggesting a good understanding of the complexities of impact.

“All our work is about being healthy and active and safety is key. If we think one of our young people is experiencing difficulties, we’ll notify the relevant agencies.”

There was a good spread of provision in terms of the beneficiaries of the work. Around four out of five organisations worked with children or young people, and half worked with families (parents and children together) or parents separately. Approximately a quarter worked with foster or kinship carers. Of those working with children or young people, 44% worked with those with additional support needs. Only 5% of organisations worked exclusively with parents/carers.

“GIRFEC creates firm expectations and raises standards. We are completely immersed in GIRFEC and the parents are too. We explain what GIRFEC means to them in terms of their children and they like the concept, it reassures them. GIRFEC suits [us] right down to the ground.”
DISCUSSION AND CONCLUSIONS

In terms of age groups, more responding organisations focussed on the early years (38%), with least focus on primary school age children (22%) and just over a quarter working with young people aged 12 – 17 and 18 – 24. The degree to which work with children, young people and families was ‘core business’ for responding organisations varied significantly. The raw data provides a useful and detailed insight into other aspects of provision, for example around specific communities of interest.

Third Sector services appear to be impacting upon large numbers of children in all age ranges (at least 28,680 excluding the national organisations, housing associations and credit unions, from those who responded). This is impressive given the size and resources of the sector and suggests that it is a very significant player in delivering wellbeing enabling work integral to the primary prevention objectives in the Single Outcome Agreement. Organisations offered a wide variety of specific support including parenting support, complementary child protection support and specialist youth work in addition to impacting on their physical environment more generally (for example, housing associations and play provision). The two most common areas of primary service delivery were arts and cultural activities and sporting activities, both as activities in their own right and importantly, as engagement mechanisms for other kinds of youth work or individual support with young people experiencing a range of difficulties. This illustrates how work which directly impacts on one domain has indirect benefits across the wellbeing domains as a whole.

Geographically, there is a relatively even spread of activity across the city by sector, with just over a third of respondents active in the north-west and north-east and just under a third active in the south. Approximately a third of all organisations were providing services to some degree in all three sectors. When we exclude organisations active across the city, there was greater cross-sectoral working in the north of the city but little cross-river working.

The profile of organisations active in each ward illustrates the significant resource available to promote GIRFEC. The developmental work around GCVS Everyone’s Children Project and the GCVS Community Connectors¹ concept would suggest that awareness of what is available in communities is low amongst statutory sector partners. Whilst the Community Connectors model is initially targeting older people’s services, the model could apply to children, young people and families and facilitate access to relevant support in their community. This would be of particular value to named people and lead professionals in the GIRFEC process as well as to communities themselves in terms of how services are targeted and co-ordinated. Further secondary analysis of the distribution of services and levels of use at ward level will be able to further illustrate where support is concentrated relative to specific types of need. This was not possible in the context of the initial phase of the study.

¹ GCVS is developing a new project – Community Connectors – which will improve access to information and connect older people, and the staff who support them, better to local services, facilities and activities, whilst supporting them to do so, if required. The key aims are to help older people have better access to better information and, if they wish, to help them look at what they need to live healthier and happier lives as independently as possible. The model of development includes integration of GCVS Third Sector data with that held by other organisations such as The Alliance and the NHS. It is hoped that this will also include Glasgow City Council resources such as Your Support Your Way and Glasgow Family Information Service although GCC are not currently participating in this. We believe an initiative of this kind would be helpful to Named Persons in particular.
DISCUSSION AND CONCLUSIONS

4.4 To identify the extent of third sector involvement with the planning and implementation processes for children and families work in Glasgow and illuminate the experiences of third sector organisations and their service users in these.

The planning landscape was described as complex and confusing. Awareness of and involvement in sixteen key planning structures were tested, drawn from those in the ICSP and Single Outcome Agreement. Overall, the awareness of planning structures exceeded involvement in them. Most strikingly, 45% of online survey respondents were not involved in any planning structures at all and 14% were not aware of any of those tested. Two thirds of respondents were aware of Community Planning – Sector or Area Partnerships and 21% reported involvement in these, although the degree of ‘involvement’ is likely to have varied, from those simply receiving funding to those participating in thematic meetings or in broader representative roles. The Glasgow Third Sector Forum at 25% and local voluntary sector networks at 33% had higher participation levels, offering some chance to feed into community planning processes but not necessarily the children’s services agenda.

In the more specific children’s services planning structures participation was lower in both the specialist city wide structures and at locality level, where important links need to be made. Although awareness of the Improving Futures and JST initiatives were the best known of these, direct participation in them was low. Just 16% of respondents were aware of the Listening to Children and Young People Steering Group and only 1% were involved in it which is concerning given the importance in GIRFEC of involving young people in decisions about their lives.

The way in which participation arrangements are currently structured does not appear to be enabling sufficiently wide participation and communication across the sectors, despite many participants wishing to be more involved.

For example, the role of the Social Care Ideas Factory (SCIF) is in recruiting and supporting ‘SCIF Ambassadors’ who bring their experience and views to various aspects of the Children’s Planning process and that of the strategy group intended to co-ordinate this work and input to the ICSP at strategic level. The findings suggest the role of the strategy group was not clearly understood, with participants unaware or unsure how they could contribute via these routes.

“There appears to be a number of networks and partnership groups with different mailing lists. Maybe it should be coordinated by one agency/network.”

The Everyone’s Children project is also part of the planning structures at strategic level and is supporting sector wide networking and local initiatives to deliver GIRFEC and improve links between the Third Sector and those who will be discharging the named person role. As part of the Third Sector Interface Everyone’s Children is also working to improve links on this agenda with the Third Sector more generally and with organisations involved in other community planning processes.
DISCUSSION AND CONCLUSIONS

Given that both SCIF and Everyone’s Children project are seeking to enable effective participation across the wider Integrated Children’s Services planning landscape the roles of both projects, and how they work together to improve participation in the process as a whole, should be clarified and the links between the structures and processes they are involved in strengthened where required.

The qualitative discussions confirmed the sense of disconnect as third sector organisations, particularly small ones, have little capacity or resource to keep up to speed. This reinforces the need for information and networking opportunities to improve that sense of connectivity.

A significant proportion felt unable to comment on the degree to which planning structures practically enable the third sector contribution. Those who expressed views were more likely to be negative than positive, commenting on the number of different groups, lack of co-ordination or clarity of role for each. There was also a sense from some organisations that they needed to be involved in too many structures which was onerous given their size, whilst others find it difficult to gain access to the process at all despite feeling they had something to offer. The perceived lack of equality and parity of esteem with the statutory sector (in terms of decision making, funding and influence) and the fact that the statutory sector often did not appear to recognise the contribution made by the third sector were real concerns expressed at each stage of the study. This perception, and the experiences which underpin it, clearly represent barriers to partnership.

“First of all the large public sector organisations need to accept and recognise the work we do and only then will proper partnership working be effective and not tokenistic!”

Whilst some organisations reported having good relationships with individual statutory services on a day to day basis, perceived lack of co-ordination and even conflict between statutory partners mean that partnerships involving more than one can present challenges. This seems to reinforce the need to improve joint working amongst the statutory partners and between them and the third sector. Social Work Services drew particular criticism for poor joint working, although it was recognised that this was partly due to heavy workloads consisting of very difficult cases.

Both larger third sector organisations and statutory sector organisations were perceived to be challenging to work with, largely because of their perceived attitudes towards small third sector organisations whose contributions were often not recognised. Competition for funding is a barrier to collaborative working, as is the unstable and short-term nature of funding in the current climate.

“There should be more recognition given to the smaller organisations such as ours instead of everyone instantly thinking of big national charities such as Aberlour, Barnardos, Children 1st. Whilst they are great organisations with which we can easily work in partnership, it means smaller organisations often get overlooked...”
DISCUSSION AND CONCLUSIONS

Despite these concerns, there was a willingness to increase partnership working within the third sector and with statutory services. It is clear from the findings that the current arrangements for participation could be much more effective in enabling connections between children and young people’s planning processes and the broader third sector interface’s role in representing the sector more generally. This is particularly important in relation to making systemic links to other important planning processes such as Health and Social Care Integration, Community Learning and Development and the work of the Poverty Leadership Panel, all of which affect children and families and the broader context in which attempts to improve wellbeing are being made.

4.5 To improve information on the workforce profile, use of volunteers and capacity building needs within the research sample.

The study profiles current staff and volunteer levels and sought to explore capacity building needs to develop this in future. Collectively, respondents had significant resources: 4,248 staff in Glasgow city. A total of 2,754 volunteers worked in Glasgow with the organisations who responded to this question. Further secondary analysis will explore how these resources are distributed across the city and how this distribution relates to the stated GIRFEC priorities of local organisations. This will be of value to the locality planning process for GIRFEC and the Integrated Children’s Services Plan. The needs of organisations in terms of knowledge development are detailed elsewhere in the study but further work is needed to explore the specific workforce development needs of staff and volunteers involved in this work and the findings of this study offer a firm foundation for doing so.

“*If you’ve got sessional staff when do you train them? Do you do it while they’re getting paid to do the work? You can’t really expect them to do full GIRFEC training themselves if they’re only with you a few hours a week.*”

Most organisations were small, with one in eight respondents having no paid staff at all and half having less than 10. Just six organisations had 100 or more paid staff in Glasgow. One in eight organisations had no volunteers and 45% had less than 10 in the city, with just 5 organisations claiming to have 100 or more volunteers. However, as other findings in this study confirm, these organisations are making a collectively significant contribution to the delivery of services and the development of a GIRFEC enabling network of services.

4.6 To explore the willingness and readiness of organisations in the sample to intensify their role in delivering GIRFEC.

Whilst awareness, understanding and overt use of GIRFEC varied across the sample, there was strong support for the essence of GIRFEC.

“*GIRFEC is a great tool. In terms of joint working it really helps to have a shared language and process, particularly as needs are increasingly complex so families often have a number of agencies involved in their lives.*”
DISCUSSION AND CONCLUSIONS

There were three broad groups: those who had been of aware of GIRFEC for some time, were familiar with the principles of the framework, used the tools and some of whom were also involved in the planning structures; those who had become aware of GIRFEC more recently, with the increased focus on it in the statutory sector and in the Children and Young People Bill, some of whom used the tools such as the SHANARRI Wellbeing Wheel; and those who were more recently or less aware of GIRFEC. Some were very keen on the GIRFEC framework and championed its philosophy, whilst others were more cynical and reluctant to adopt it as they were concerned that this might involve a lot of work, which would have to be repeated if it was changed.

Around two-thirds of respondents felt well-informed, whether they used it overtly or not, but the qualitative discussions would suggest that knowledge sometimes rests with managers and does not cascade to staff, volunteers or other stakeholders as some aspects of GIRFEC’s tools and language are not perceived to be accessible or relevant for all.

Around half use GIRFEC explicitly in their day to day practice although this reduced slightly for those using it to frame policies/planning, produce funding bids and in monitoring and evaluation. An additional 36-41% of online survey respondents claimed to use GIRFEC but not explicitly in each of these aspects of their work, leaving just 11-19% of respondents not currently incorporating GIRFEC explicitly or implicitly in what they do. Larger organisations were much more likely to have adopted GIRFEC explicitly, with 80% reflecting it in day to day practice compared to just a quarter of small organisations.

GIRFEC language was reportedly used by two-thirds of respondents - a positive development given the importance of a shared perspective on delivering wellbeing support across and between sectors. This was followed by use of the SHANARRI Wellbeing Wheel (just over half), which appeared to be an accessible conceptual device for many respondents.

There was lower usage of the other tools tested, suggesting that there is significant scope to encourage fuller use of the GIRFEC suite of materials and improve joint working in order to do so. Some organisations reported that they used their own bespoke interpretations of the tools which better suited their circumstances. All of this suggests scope for further sharing of approaches and methods, within Glasgow and with others across Scotland.

Voluntary sector networks were the main sources of information on GIRFEC and participants were keen for Everyone’s Children to further develop its existing role in informing, training and networking third sector organisations around the GIRFEC agenda.

Although some organisations felt they were already playing as much of a role as they wished, others (53% of the survey) would like to become more involved in GIRFEC provided it adds value to what they do. There was most interest in delivering more of their current services in
DISCUSSION AND CONCLUSIONS

line with GIRFEC wellbeing aims and in being able to influence service planning by contributing their insights and unique experiences.

Given our earlier assertion that smaller organisations focussed on very specific wellbeing support activities were less likely to have responded to the study, this suggests a role for Everyone’s Children and others to support them to understand, link with and implement GIRFEC alongside larger organisations already using it successfully. There is also a need to ‘sell’ the advantages of GIRFEC to some organisations in the city, convincing them that GIRFEC, as embedded in legislation, has ongoing relevance for them. This will require work to address the lack of development capacity and help these organisations understand and respond to emerging drivers of change.

“We need to embed and enact GIRFEC principles at a community level. To promote the application of GIRFEC principles in the context of a strengths-based or assets-based approach to families, children and communities.”

4.7 To use the results of the mapping study to inform the programme of practical support and mutual learning which is being delivered by the Everyone’s Children Project and the other community planning partners involved in this work in Glasgow.

This study has a practical focus. It seeks to use the intelligence gathered to improve the city’s response to GIRFEC and in particular the recognition of the third sector in delivering and planning support to children, young people and families. The following recommendations for action are based on the evidence and views gathered throughout the study.
5.0 RECOMMENDED ACTIONS FOR IMPROVED THIRD SECTOR GIRFEC IMPLEMENTATION IN GLASGOW

These draft proposals arise from the insights generated by the research, are further refined in light of the EC project’s training and engagement work and by shared learning from other Third Sector Interfaces across Scotland. These are presented for discussion and set out an agenda for the Everyone’s Children project, Glasgow’s third sector as a whole and for public sector partners. The proposals should be viewed as further enabling the third sector contribution to the Glasgow Interim Children’s Services Plan.

The revised statutory planning framework arising from the Children and Young People (Scotland) Act 2014 envisages a wider and deeper role for the third sector. This plan seeks to support this by responding to factors which support or inhibit the third sector contribution to GIRFEC and suggest strategic and operational investment to deliver the GIRFEC prevention dividend.

The plan assumes that improvements can be achieved by taking the following action:

- mobilising a wider array of third sector partners;
- improving mutual awareness and co-ordination between services and across sectors;
- improving systemic links between sectors and planning processes dealing with the needs of children, young people and families in the GIRFEC 0-18 target range;
- shifting resources from all sectors to ever deeper primary prevention; and
- securing additional resourcing where possible.

5.1 Key partnership principles

Achieving the partnership arrangements to deliver the plan will require greater parity of esteem and improved consistency in relationships across sectors based on the recognition of the contribution of both the third and public sectors. This includes work where some public sector services have come to rely on some third sector services to support targeted interventions with families and also as a means of delivering deeper primary prevention at population level in communities.

This plan seeks to secure longer-term funding for the third sector commensurate with the contribution being made and address the power imbalance between the sectors, evident from the study, in key processes such as commissioning. Partnership relationships and structures will also benefit from a greater shared understanding of the pressures and priorities facing each sector and need to build a greater role for the third sector in delivering GIRFEC and its deeper aspirations for primary prevention.

The plan offers tangible solutions to challenges identified in supporting a fuller mobilisation of the third sector and enabling it to contribute alongside other statutory partners. Some of the actions identified are specific to GCVS and the Everyone’s Children project; others require further debate in terms of how they might be delivered and by whom. In many cases it is anticipated that a number of partners will share delivery of the actions. What follows are specific proposals for the content of the plan.
### 5.2 Action Plan

**Fig 14**

<table>
<thead>
<tr>
<th>Required action</th>
<th>Delivery partners</th>
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<tbody>
<tr>
<td><strong>AWARENESS RAISING AND INFORMATION PROVISION</strong></td>
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<tr>
<td>The flow and quality of information is a recurring issue from the study and related engagement. Specific proposals to improve this include the following.</td>
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<tr>
<td><strong>Within the Third Sector and in communities</strong></td>
<td></td>
</tr>
<tr>
<td>1. Continue to produce regular bulletins, newsletters and other promotional materials to raise awareness of GIRFEC and related issues amongst the 1000+ TS organisation on the project mailing list.</td>
<td>Everyone’s Children project with input from other Integrated Children’s Services partners</td>
</tr>
<tr>
<td>2. Continue to share specific information about GIRFEC developments, tools and resources which support TS organisations working with children, young people and families to maximise their contribution to its planning and implementation.</td>
<td>Everyone’s Children project TS organisations and statutory partners</td>
</tr>
<tr>
<td>3. Explore the potential for interactive web developments which allow organisations to share insights, experience and resources with each other.</td>
<td>Everyone’s Children project TS organisations and statutory partners</td>
</tr>
<tr>
<td>4. Continue to promote the importance of GIRFEC and related activity to community organisations more generally, including community anchor and infrastructure organisations.</td>
<td>Everyone’s Children project, Third Sector Interface and other TS networks</td>
</tr>
<tr>
<td>5. Raise awareness amongst third sector adult services whose remits affect children’s experiences.</td>
<td>Everyone’s Children project, Third Sector Interface and other TS networks</td>
</tr>
<tr>
<td>6. Develop more accessible information for parents and young people on the GIRFEC concept and how it can support their wellbeing.</td>
<td>All Integrated Children’s Services partners</td>
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### Required action

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<tr>
<td>7. Clearer, more accessible information about GIRFEC is needed, particularly its wider preventative functions, e.g. ‘An Introduction to GIRFEC in Glasgow’ aimed at small TS organisations’ staff and management committees, parents and the wider community is needed. This should include the statutory elements and how non-statutory partners can support the wider wellbeing aspects of GIRFEC, building on the wellbeing wheel.</td>
<td>Everyone’s Children project and all Integrated Children’s Services partners</td>
</tr>
<tr>
<td>8. An accessible guide to the core policy framework for GIRFEC and other progressive approaches to working with children, young people and their families should be produced. This should make links to emerging local developments such as Health and Social Care Integration as well as important contextual development such as community empowerment or procurement policy.</td>
<td>All Integrated Children’s Services partners</td>
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### To support public sector partners especially named people

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<tr>
<th>To support public sector partners especially named people</th>
<th>Delivery partners</th>
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<tr>
<td>9. Survey the use and experience of third sector wellbeing support services by named persons in universal services in one learning community in Glasgow.</td>
<td>Everyone’s Children project</td>
</tr>
<tr>
<td>10. Work with local TS organisations to promote third sector wellbeing support services to named persons in universal services in that area.</td>
<td>Everyone’s Children project with local TS partners</td>
</tr>
<tr>
<td>11. Work to strengthen active signposting and referral processes to third sector organisations, potentially building on our Community Connectors concept.</td>
<td>Everyone’s Children project and all Integrated Children’s Services partners</td>
</tr>
</tbody>
</table>

### COMMUNITY DEVELOPMENT & STRENGTHENING PRIMARY PREVENTION

The study confirms that many TS organisations deliver wellbeing and contribute to primary prevention. There is a need to improve measurement, recognition and coordination of this and to strengthen links to locality planning. Everyone’s Children capacity building and engagement support in North West Glasgow supports this.

<table>
<thead>
<tr>
<th>COMMUNITY DEVELOPMENT &amp; STRENGTHENING PRIMARY PREVENTION</th>
<th>Delivery partners</th>
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<tr>
<td>12. Locality planning should be reviewed to improve relevance and connectivity across sectors.</td>
<td>All Integrated Children’s Services partners</td>
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<tr>
<td>13. Co-ordinate TS action in existing TS structures supporting early years (e.g. Joint Support Teams), youth work and other functional remits such as addictions and link to children’s services locality planning.</td>
<td>All Integrated Children’s Services partners</td>
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<td>Required action</td>
<td>Delivery partners</td>
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<tr>
<td>14. Continue supporting the new North West Children and Young People Forum to meet quarterly to improve networking and shared learning.</td>
<td>Everyone’s Children project</td>
</tr>
<tr>
<td>15. Work In Ruchill/Possil to support integration of GIRFEC related activity to Thriving Places and increase community ownership of this work.</td>
<td>Everyone’s Children project, Democratic Services and Local Thriving Places partners</td>
</tr>
<tr>
<td>16. Seek to share this experience with other thriving places neighbourhoods.</td>
<td>Everyone’s Children project, Democratic Services and Community Anchor organisations</td>
</tr>
<tr>
<td>17. Further analyse the impact of gaps in development capacity in Third Sector partners widely reported in this study as inhibiting progress.</td>
<td>Everyone’s Children project, Third Sector partners and research partners</td>
</tr>
<tr>
<td>18. Potential development of third sector GIRFEC link worker posts, whose role could include addressing development capacity gaps at local level and information developments.</td>
<td>GCVS and all Integrated Children’s Services partners</td>
</tr>
<tr>
<td>19. Increasing co-ordination of Community Capacity Building support linked to the emerging CLD Action Plan for Glasgow.</td>
<td>Glasgow’s Learning Partnership including all Integrated Children’s Services partners</td>
</tr>
</tbody>
</table>

**THIRD SECTOR INFLUENCE, ADVOCACY AND STRATEGIC CAPACITY BUILDING**

The study has highlighted that the existing planning and partnership landscape is difficult for most TS organisations to engage with productively. The following actions are central to addressing this and strengthening GIRFEC in Glasgow.

<p>| 20. The Interim Integrated Children’s Services Plan should be subject to consultation and co-production with stronger TS involvement from this point forward, informed by the principles of the Children and Young People (Scotland) Act. This action plan should be endorsed in the interim plan. | Everyone’s Children project and all Integrated Children’s Services partners                        |</p>
<table>
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<tr>
<td><strong>21.</strong> Third Sector co-ordination and engagement structures associated with the ICSP should be reviewed and strengthened to involve a wider group of TS organisations.</td>
<td>All Integrated Children’s Services partners</td>
</tr>
<tr>
<td><strong>22.</strong> A clear map of planning and influencing structures should be produced to help TS partners locate themselves in this complex environment and understand the links with other planning processes which impact on children and families. It is clear from wider project engagement that many public sector colleagues would also welcome such a resource. This must reflect strengthened links to TSI and voluntary sector network structures which deliver third sector and community influence on community planning more generally.</td>
<td>All Integrated Children’s Services partners</td>
</tr>
<tr>
<td><strong>23.</strong> Improved links should be made to the Glasgow TSI workplan, Glasgow PLP Child Poverty Strategy and the Statutory CLD Plan for Glasgow.</td>
<td>All Integrated Children’s Services partners</td>
</tr>
<tr>
<td><strong>24.</strong> Specific capacity building work should be actioned to increase readiness in TS orgs to operate in the commissioning and procurement environment.</td>
<td>All Integrated Children’s Services partners</td>
</tr>
<tr>
<td><strong>25.</strong> A GIRFEC Partnership Improvement Plan should be developed, building on methodology developed in other Community Planning Partnerships and formally linked to the Interim Integrated Children’s Services Plan.</td>
<td>All Integrated Children’s Services partners</td>
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</table>
| **DELIVERING GIRFEC TRAINING AND LEARNING SUPPORT**  
The study has highlighted training and learning needs for third sector partners.                                                                                                                                          |                                                        |
<p>| <strong>26.</strong> Continue to deliver a city-wide training programme based on needs identified in the study and ongoing discussions with the sector.                                                                          | Everyone’s Children project                            |
| <strong>27.</strong> Facilitate shared learning between Glasgow’s Third Sector and others TS partners via TSIs across Scotland and the national Third Sector GIRFEC project.                                             | Everyone’s Children project, with National TS GIRFEC Project |
| <strong>28.</strong> Tools and resources should continue to be shared within the sector in Glasgow via the EC web pages and other resources.                                                                                   | Everyone’s Children project                            |</p>
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<tr>
<td>29. A training consortia should be developed with bigger specialist TS orgs to widen the menu of opportunities available to Glasgow’s Third Sector.</td>
<td>Everyone’s Children project and TS partners</td>
</tr>
<tr>
<td>30. Public sector training should be open to third sector partners where possible to share access to learning activity and to help provide opportunities/break down barriers to joint working.</td>
<td>All Integrated Children’s Services partners</td>
</tr>
<tr>
<td>31. All training developments should be informed by the need to look flexibly at how they meet the needs of a wide range of stakeholders. This requires flexibility in delivery arrangements including learning events which run in the evening, at weekends and via residential experiences as well as the promotion of online learning tools.</td>
<td>All Integrated Children’s Services partners</td>
</tr>
<tr>
<td>DISSEMINATION, FURTHER RESEARCH AND ANALYSIS is needed to build on the findings of this research and generate further insights which support the wider co-ordination of the sector and its partners.</td>
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</tr>
<tr>
<td>32. The key messages should be summarised and widely disseminated in Glasgow’s key planning structures, in local TS networks and across Scotland’s TSI network. More accessible materials and an appropriate targeting strategy will be developed for this purpose.</td>
<td>Everyone’s Children project and all Integrated Children’s Services partners</td>
</tr>
<tr>
<td>33. Conduct ongoing secondary analysis of the data to further illuminate work on the ground and seek other data from this cohort of respondents where practical.</td>
<td>Everyone’s Children project with research support from other partners</td>
</tr>
<tr>
<td>34. Highlight how TS organisations are improving outcomes across multiple wellbeing domains and spread good practice via case studies and participation in the Everyone’s Children learning programme.</td>
<td>Everyone’s Children project</td>
</tr>
<tr>
<td>35. Conduct further categorisation of organisations with GIRFEC potential who did not engage with this study. It will seek to identify research and development partners who wish to explore this further.</td>
<td>Everyone’s Children project</td>
</tr>
<tr>
<td>36. Further explore the experience of TS organisations in existing children’s services planning arrangements, potentially using the GIRFEC engagement matrix developed in Renfrewshire.</td>
<td>Everyone’s Children project with research support from other partners</td>
</tr>
<tr>
<td>37. GCVS will seek to sample the workforce development needs of TS organisations working on this agenda as part of wider workforce development activity over the coming year.</td>
<td>GCVS</td>
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### Required action

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<tr>
<td>38. Gauge wider engagement with the children and families agenda and relevant TSI services via the Glasgow Third Sector Interface Stakeholder Survey.</td>
<td>GCVS</td>
</tr>
<tr>
<td>39. Additional research should be initiated which explores the added value of the third sector contribution to GIRFEC as it is viewed from within the sector and from the perspective of public sector partners.</td>
<td>All Integrated Children’s Services partners</td>
</tr>
<tr>
<td>40. An evaluation strategy should be developed which takes an overview of implementing GIRFEC in Glasgow and considers the contribution of statutory and third sector partners alongside the contribution of communities themselves.</td>
<td>All Integrated Children’s Services partners</td>
</tr>
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### 5.3 Stakeholders

This plan is aimed at the following partners.

**The Third Sector**

- Organisations already delivering services - both large and small - or with the potential to make a greater contribution to wellbeing outcomes envisaged by GIRFEC.
- Glasgow’s Third Sector Interface which co-ordinates broader Third Sector (TS) activity and infrastructure relevant to GIRFEC and links to other policy and practice contexts e.g. Health and Social care integration, public service reform and community empowerment.
- Organisations with specific enabling roles particularly, though not exclusively, GCVS – Everyone’s Children project, Glasgow Life and others such as SCIF.

**The statutory partners**

- Scottish Government, as legislators, funders and sponsors of key policy and practice developments.
• Universal services such as the NHS and Education Services, including in their role as a named person, and those delivering specific supports to vulnerable children and families through specific interventions, e.g. Social Work services, via existing joint planning arrangements.

• Glasgow Health and Social Care Partnership, specifically in relation to its role to integrate adult services for parents, which affect children, and children’s services especially specialist roles in relation to disability, mental health and the needs of carers. Organisations in the wider ‘Glasgow Family’ such as Glasgow Life delivering statutory responsibilities, for example community learning and development planning.

Other key stakeholder structures and processes

This includes those providing resources to deliver GIRFEC or involved in related strategic partnership action with a high level of relevance to delivering GIRFEC:

• Glasgow Poverty Leadership Panel and its particular remit to tackle child poverty.
• Glasgow’s Learning Partnership, in its role to co-ordinate support for Community Learning and Development in the city
• Glasgow Community Planning Partnership, in terms of its overview of preventative approaches to Glasgow’s regeneration.